

**Work Order ID 99508****\*99508\***

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Monday, April 15, 2013 11:21:30 AM

Item ID: D139-799-025

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Cargo Compartment Raingutter

Start Date: 4/10/2013 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 4/11/2013 Req'd Qty: 1.00

**\*1\***

Customer: CU-DAR001

Reference: RMA RA111514 - *Review*Approvals: Process Plan: *UMF*Date: *13-4-15* Tooling:

Date:

Run Start **\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
IIN-D139-799	G								

100

0.00

**\*100\***

QC

Quality Control

Memo

INSPECT RA 111514 D139-799-025 X 1 B#93530

KIT IS GOOD

ADD NEW PAPERWORK AND LABELS

0.00

*DAS 16 8-83 B/L 10 CHG001*

110

Identify as per dwg & Stock Location *FG 023* 0.00**\*110\***

Packaging

Memo

0.00

Packaging

*13-4-26*

120

QC21- Final Inspection - Work Order Release 0.00

**\*120\***

QC

Quality Control

Memo

0.00

*CHG001**13/5/6**13-04-26*

# Picklist Print

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Work Order ID: 99508

Parent Item: D139-799-025

Start Date: 4/10/2013

Required Date: 4/11/2013

Parent Item Name: Cargo Compartment Raingutter

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP REV:A 12.01.19 NEW ISSUE DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D139-799-025 Cargo Compartment Raingutter		Manufactured	No				Each	3.0000		1			

Location

Loc Qty

Loc Code

FG

2

97739

2

FG023

1

97739

1

1 x 93530 MF 13-4-15.

# **RA 111514 D139-799-025**

## **B93530**

Received @ Dart April 2<sup>nd</sup>, 2013  
Inspected @ Dart April 10<sup>th</sup>, 2013

Customer: ORANGE GOLBAL AIR  
Customer Contact: AFSHA NOORIAN  
Shipped from: LONDON ON, CANADA

### **Instructions for RA 111514 D139-799-025 B93530 CHG001**

- Kit still at CHG 001
- Kit is complete
- Parts need to be re tagged and rebadged
- Needs new paper work and labels
- Needs new BATCH # for restocking

**Time Estimate** = 1 HOUR ONLY (stores)

**Departments Required:** Stores (restocking)

**Pictures Attached** = NO

**QTY INSPECTED** = x1 D139-799-025

**THIS INSTRUCTION SHEET MUST  
BE ATTACHED TO THE  
RESTOCKING WORK ORDER AT  
ALL TIMES!!!!**

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		